



May 2, 2016 (Updated May 16, 2016)

Announcement 1136

URGENT: Coverage, Limitations and Prior Authorization Requirements for the Nevada Medicaid and Nevada Check Up Dental Program Document Is Temporarily Unavailable

The Coverage, Limitations and Prior Authorization Requirements for the Nevada Medicaid and Nevada Check Up Dental Program document (Attachment A of the Provider Type 22 Billing Guidelines) is currently being updated and has been temporarily removed from the Billing Information webpage. A future web announcement will notify providers when Attachment A has been updated and is available for reference. Please refer to the Treatment History Search feature in the Provider Web Portal for the service limits. Log into the [Provider Web Portal](#), and click the "Treatment History" link, which is available under the "Claims" tab. Please review [EVS User Manual Chapter 9: Treatment History](#) for instructions on accessing Treatment History search and the explanations for error messages.